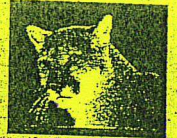


RAINIER SCHOOL DISTRICT
Harassment, Intimidation and Bullying
Incident Reporting Form



Your Name _____ Today's Date _____

Victim of Bullying _____ Bully(ies) _____

Date(s) of Incident _____ Time of Incident _____ Adult Reported To _____

Witnesses: _____

Location of Incident (circle all the apply)

- | | | | | | |
|-----------|---------------------|--------------|-------------|------------|----------------|
| Classroom | Off School Grounds | Hallway | Restroom | Playground | Locker Room |
| Lunchroom | Internet/Cell Phone | Sports Field | Parking Lot | Bus | To/From School |

Other (Please describe) _____

Please check the box(es) that best describes what the bully did. Choose all that apply.

- Hitting, kicking, shoving, spitting, hair pulling or throwing something at the victim
- Getting another person to hit or harm the victim
- Denying access to a location
- Taunting, teasing, name calling, putting the victim down and/or making the student the target of jokes
- Isolating, intentionally excluding or rejecting
- Making rude or threatening gestures
- Making another student fearful, demanding money or exploiting
- Spreading rumors or gossip that is harmful
- Cyber Bullying (bullying by calling, texting, emailing, web posting, etc.)
- Sexual Harassment (specify...comments, jokes, touching, rumors, display of material, etc.)

Other (please explain) _____

Written Description of the Incident

For Office Use Only

Received by _____ Date Received _____

Action Taken _____

Parent/Guardian Contact Date: _____ Method: _____

Circle One: Resolved Unresolved Referred to: _____